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| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br>(only for new nonprovisional applications under 37 CFR 1.53(b))   | Attorney Docket No.                            | DNAG-225<br>(10111227)   | Total Pages     |  |
|  | First Named Inventor or Application Identifier |  |                 |  |
|  | Ulrich Bley, et al.                            |  |                 |  |
|  | Express Mail Label No.                         | EL 829764939 US  |                 |  |
| <b>APPLICATION ELEMENTS</b><br><br>See MPEP Chapter 600 concerning utility patent application contents.  |  | <b>ADDRESS TO:</b> Assistant Commissioner for Patents<br>Box Patent Application<br>Washington, DC 20231  |                 |  |
| <p>1. <input type="checkbox"/> Fee Transmittal Form (attached hereto in duplicate)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 8]<br/>(Preferred arrangement set forth below)</p> <ul style="list-style-type: none"><li>- Descriptive Title of the Invention</li><li>- Cross References to Related Applications</li><li>- Statement Regarding Fed sponsored R&amp;D</li><li>- Reference to Microfiche Appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 1]</p> <p>4. Oath or Declaration</p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br/>(for continuation/divisional check boxes 5 and 16)</p> <p>i. <input type="checkbox"/> Deletion of Inventor(s)</p> <p>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>5. <input checked="" type="checkbox"/> Incorporation by Reference<br/>(useable if Box 4b is checked)</p> <p>The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> |  | <p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Copy</p> <p>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p> <p>c. <input type="checkbox"/> Statement verifying identity of above copies</p> <p><b>ACCOMPANYING APPLICATION PARTS</b></p> <p>8. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement<br/>(when there is an assignee) <input type="checkbox"/> Power of Attorney</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input type="checkbox"/> Information Disclosure Statement<br/>(IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>12. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br/>(Should be specifically itemized)</p> <p>14. <input type="checkbox"/> Certified Copy of Priority Document(s)</p> <p>15. <input type="checkbox"/> Other:</p> |                 |  |
| 16. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:<br><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part (CIP)  |  |  |                 |  |
| 17. <input type="checkbox"/> For this application, please cancel   |  |  |                 |  |
| <b>18. CORRESPONDENCE ADDRESS</b><br><input type="checkbox"/> Customer Number or Bar Code Label 24972 or <input type="checkbox"/> Correspondence Address below   |  |  |                 |  |
| Name: James R. Crawford<br>Address: Fulbright & Jaworski L.L.P.<br>666 Fifth Avenue<br>New York, NY 10103 USA  |  |  |                 |  |
| <b>19. TELEPHONE CONTACT</b><br>Please direct all telephone calls or telefaxes to James R. Crawford at:<br>Telephone: (212) 318-3148 Fax: (212) 318-3400   |  |  |                 |  |
| <b>19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED</b>   |  |  |                 |  |
| NAME   | James R. Crawford                              |  | Reg. No. 39,155 |  |
| SIGNATURE  |  |  |                 |  |
| DATE   | November 15, 2001                              |  |                 |  |